

Table of Contents

IAB SH 2270109

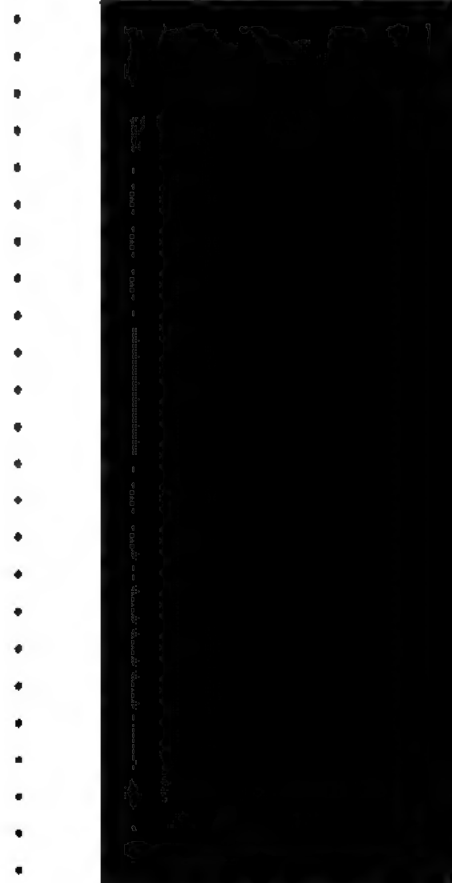
AUDIO/VIDEO TRACKING SHEET

INVESTIGATOR'S LOG

OFFICER INVOLVED SHOOTING FORM & INVESTIGATIVE SUMMARY

INTERVIEWS

- Deputy Acosta - Homicide
- Deputy Duxbury - Homicide
- Deputy Acosta - IAB
- Deputy Duxbury - IAB
- Deputy Bigelow
- Deputy Bustamante
- Deputy Chen
- Deputy Quintana



- Deputy D'Antonio
- Deputy Davis



EXHIBITS

- A** - Homicide Book
- B** - (1) CD Containing Crime Scene Photos (Color Copies of Photos Printed and Attached)
- C** - Google Earth image initialed by Deputy Acosta
- D** - Incident History Report for call for service (tag #45)

MISCELLANEOUS

- Administrative Rights Force Review forms for Deputies Acosta and Duxbury
- Receipt for Documents

Los Angeles County Sheriff's Department

Officer Involved Shooting

Page 1 of 6

Report Date: 07/09/10		Bureau/Station/Facility: FOR I / Santa Clarita Station		Admin. Invest. ? <input type="checkbox"/>		Hit? <input checked="" type="checkbox"/>	
Incident Information							
URN: 010-11288-0610-455		Date: 07/09/10		Time: 0250 Hours			
City or Station: Canyon Country		Nature of Incident: Deputies shot at suspect after he said he had a gun and pulled a black object out from behind his back and pointed it at deputies. Suspect was shot when he told deputies he had second gun as he reached in his back pocket.					
Location: Soledad Canyon Road Canyon Country							
Location Type (circle one or more): Backyard Beach Business Freeway Industrial Park Parking Lot Residence Rural School Street Other: _____		Lighting (circle only one): Darkness Daylight Other Street Lights Weather (circle only one): Clear Cloudy Fog Rain Distance: Approx 30 and 45 feet		Incident Type (circle one or more): Accidental Armed Person Fleeing Suspect Foot Pursuit Gun Take Away Moving Vehicle Sniper/Armbush Stunt Struggle Involved Traffic Stop Unarmed Person Unintentional Vehicle Pursuit Warrant Service Warning Shot Other: _____		Initiated by (circle only one): Arrest Warrant Call Observation One Person Unit Other Search Warrant Two Person Unit Prior Activity (circle only one): Detective Inmate Transport Other Routine Patrol	
Total # of Shots Fired by Deputy 6		Total # of Shots Fired by Suspect 0		Aero Unit? <input type="checkbox"/>		Canine Unit? <input type="checkbox"/>	
Employee Witnesses							
Employee #	Last Name	First Name	M.I.	Shift Time (circle only one):	Shift Type (circle only one):		
	Bigelow	Daniel		EM PM Day	Regular	Overtime	Off Duty
Employee #	Last Name	First Name	M.I.	Shift Time (circle only one):	Shift Type (circle only one):		
	Bustamante	Felix		EM PM Day	Regular	Overtime	Off Duty
Employee #	Last Name	First Name	M.I.	Shift Time (circle only one):	Shift Type (circle only one):		
	Chen	Jerry		EM PM Day	Regular	Overtime	Off Duty
Non-Employee Witnesses							
Last Name		First Name		M.I.			
Street Address		City		Zip Code		Work Ph Home Ph	
Last Name		First Name		M.I.			
Street Address		City		Zip Code		Work Ph Home Ph	
Last Name		First Name		M.I.			
Street Address		City		Zip Code		Work Ph Home Ph	
Supervisors							
Employee #	Last Name	First Name	M.I.	(circle one or more):		Witness to shooting	
	Ballentine	Dion		On Duty Present during shooting		Involved in shooting	
Employee #	Last Name	First Name	M.I.	(circle one or more):		Witness to shooting	
				On Duty Present during shooting		Involved in shooting	
Watch Sergeant							
Employee #	Last Name	First Name	M.I.				
	Miller	Gary					
Watch Commander							
Employee #	Last Name	First Name	M.I.				
	Stillwell	Dustin	A.				

PSTD Use Only	
SH # _____	

Rollout Information				
Arrival Date	07/09/10	Arrival Time	0630	Date Submitted
Employee #		Last Name	First Name	M.I.
		Ault	Alicia	M.I.
Employee #		Last Name	First Name	M.I.
		Adler	Kelly	M.I.
Employee #		Last Name	First Name	M.I.
		Allen	Victor	M.I.
Shooting / Force Information				

Method

(AW)	Arwen	(OV)	Other Weapon: Vehicle
(BC)	Baton:(Control)	(OB)	Other Weapon: Blunt Object
(BI)	Baton:(Impact)	(OO)	Other Weapon: Other
(BF)	Body Fluids	(PK)	Personal Weapon: Feet/Leg: (Kick)
(CN)	Canine	(PS)	Personal Weapon: Feet/Leg: (Sweep)
(CR)	Carotid Restraint	(PH)	Personal Weapon (Hand/Arm)
(CH)	Choke Hold	(PP)	Personal Weapon (Push)
(CT)	Control Holds:(Control Techniques)	(PO)	Personal Weapon (Other)
(TT)	Control Holds:(Team Takedown)	(RS)	Resistance
(TD)	Control Holds:(Takedown)	(CN)	Restraint Device (Capture Net)
(CE)	Chemical	(RH)	Restraint Device (Handcuffs)
(OC)	Chemical Agents (OC Spray)	(HB)	Restraint Device:Hobble (Legs Only)
(TG)	Chemical Agents (Tear Gas)	(TP)	Restraint Device:Hobble (TARP)
(EX)	Explosives	(RE)	Restraint Device: REACT Belt
(FH)	Firearm (Handgun)	(SP)	Sap
(FR)	Firearm (Rifle)	(SH)	Shield
(FS)	Firearm (Shotgun)	(SG)	37mm Stinger
(FO)	Firearm (Other)	(SB)	Sling Ball
(FB)	Flashbang	(ST)	Stun Bag
(FL)	Flashlight	(TR)	Taser
(OE)	Other Weapon: Edged	(UC)	Uncooperative

Type of Injury

(AB)	Abrasion
(BR)	Bruise
(BU)	Burn
(CP)	Complaint of Pain
(CO)	Concussion
(DH)	Death
(DI)	Dislocation
(DB)	Dog Bite
(FR)	Fractures
(GS)	Gunshot
(HB)	Human Bite
(LC)	Lacerations
(ND)	Nerve Damage
(OD)	Organ Damage
(PA)	Paralysis
(PW)	Puncture Wound
(SD)	Soft Tissue Damage
(ST)	Sprain/Twists
(UN)	Unconscious
(RM)	Refused Med Treatment
(NN)	NONE

Body Part Injured

{AD}	Abdomen
{AK}	Ankle
{AR}	Arm
{BK}	Back
{BT}	Buttocks
{CH}	Chest
{EL}	Elbow
{FA}	Face
{FE}	Feet
{FI}	Fingers
{GE}	Genitals
{GR}	Groin
{HD}	Hand
{HE}	Head
{HI}	Hip
{IN}	Internal
{KN}	Knees
{LE}	Leg
{NK}	Neck
{SH}	Shoulder
{WR}	Wrist

Brand

(AK)	AK-47	(IV)	Iver Johnson	(RJ)	RGI
(BN)	Benelli	(JE)	Jennings	(RO)	Rossi
(BR)	Beretta	(LO)	Lorcin	(SW)	Smith & Wesson
(BW)	Browning	(LU)	Luger	(SR)	Sturm Ruger
(CH)	Charter Arms	(MA)	Martin	(ST)	Sterling
(CO)	Colt	(MO)	Mossberg	(TA)	Taurus
(DA)	Davis Industries	(NC)	NCI aka SKS	(WE)	Weatherby
(GL)	Glock	(NA)	North American	(WN)	Winchester
(HA)	Harrington & Richardson	(NO)	Norisco	(US)	US Government
(HI)	Hi Standard	(RA)	Raven	(YY)	Handmade (Inmate)
(HK)	H & K	(RM)	Remington	(XX)	Homemade (Non-Inmate)
(IT)	Ithaca	(RG)	RG	(ZZ)	Other Brand

Caliber

(9) 9 mm	(24) .243 caliber	(41) .410 gauge
(10) 10 mm	(25) .25 caliber	(44) .44 caliber
(12) 12 gauge	(30) .308 caliber	(46) .46 caliber
(20) 20 gauge	(35) .357 caliber	(50) 50 mm
(21) 22-250	(38) 30-60 caliber	(SL) Slug
(22) .22 caliber	(38) .38 caliber	(WV) Other caliber
(23) .223 caliber	(40) .40 caliber	

FORCE APPLIED (one code per block)

[illegible]

Officer Involved Shooting Involved Employee Information

URN: 010-11288-0610-455

Page 3 of 6

Involved Employee									
E 1	Employee #	Last Name			First Name			M I	
			Acosta			Eric			S
	Sex:	Race:	Rank	Unit Assignment:	Work Assignment (Unit #, Module, etc.):				
	M	W	DSG	Santa Clarita Station	63				
	Shift Time (circle only one):		Shift Type (circle only one):		Intoxication/Drug Usage?		Substance Used:		
	(EM) PM Day		(Regular) Overtime Off Duty		<input type="checkbox"/>				
	Hospital Admission?		Hospital Name:		Coroner Case?		Coroner Case #		Interviewed?
	<input type="checkbox"/>				<input type="checkbox"/>				<input type="checkbox"/>
	Hrs of sleep prior to shooting:		Duty Time (hrs):		Clothing (circle only one):		Other Factors:		
	7-8		8		Plain Clothes no Vest Plain Clothes w/ Vest Raid Jacket no Vest Raid Jacket w/ Vest				
Age:	Height:	Weight:	PPC Qualification Date:		Laser Training Date:				
		602 200							
Certified with Weapon Used?		Patrol Certification?		Certification Unit:		Prior Shootings?		Number of Prior Shootings:	
<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>			
Weapons Fired Brand:		Caliber		# Shots		Weapons Fired Brand:		Caliber # Shots	
Beretta		9mm		2					
Field Training Officer Emp #		Last Name		First Name		M.I.			
Field Training Officer Emp #		Last Name		First Name		M.I.			
E 2	Employee #	Last Name			First Name			M I	
			Duxbury			Kevin			B
	Sex:	Race:	Rank	Unit Assignment:	Work Assignment (Unit #, Module, etc.):				
	M	W	DSG	Santa Clarita Station	63B				
	Shift Time (circle only one):		Shift Type (circle only one):		Intoxication/Drug Usage?		Substance Used:		
	(EM) PM Day		(Regular) Overtime Off Duty		<input type="checkbox"/>				
	Hospital Admission?		Hospital Name:		Coroner Case?		Coroner Case #		Interviewed?
	<input type="checkbox"/>				<input type="checkbox"/>				<input type="checkbox"/>
	Hrs of sleep prior to shooting:		Duty Time (hrs):		Clothing (circle only one):		Other Factors:		
	7-8		8		Plain Clothes no Vest Plain Clothes w/ Vest Raid Jacket no Vest Raid Jacket w/ Vest				
Age:	Height:	Weight:	PPC Qualification Date:		Laser Training Date:				
		602 135			06/01/09		None		
Certified with Weapon Used?		Patrol Certification?		Certification Unit:		Prior Shootings?		Number of Prior Shootings:	
<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>			
Weapons Fired Brand:		Caliber		# Shots		Weapons Fired Brand:		Caliber # Shots	
Beretta		9mm		4					
Field Training Officer Emp #		Last Name		First Name		M.I.			
Field Training Officer Emp #		Last Name		First Name		M.I.			
E	Employee #	Last Name			First Name			M.I.	
	Sex:	Race:	Rank	Unit Assignment:	Work Assignment (Unit #, Module, etc.):				
	Shift Time (circle only one):		Shift Type (circle only one):		Intoxication/Drug Usage?		Substance Used:		
	EM PM Day		Regular Overtime Off Duty		<input type="checkbox"/>				
	Hospital Admission?		Hospital Name:		Coroner Case?		Coroner Case #		Interviewed?
	<input type="checkbox"/>				<input type="checkbox"/>				<input type="checkbox"/>
	Hrs of sleep prior to shooting:		Duty Time (hrs):		Clothing (circle only one):		Other Factors:		
	8				Plain Clothes no Vest Plain Clothes w/ Vest Raid Jacket no Vest Raid Jacket w/ Vest				
Age:	Height:	Weight:	PPC Qualification Date:		Laser Training Date:				
Certified with Weapon Used?		Patrol Certification?		Certification Unit:		Prior Shootings?		Number of Prior Shootings:	
<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>			
Weapons Fired Brand:		Caliber		# Shots		Weapons Fired Brand:		Caliber # Shots	
Field Training Officer Emp #		Last Name		First Name		M.I.			
Field Training Officer Emp #		Last Name		First Name		M.I.			

Los Angeles County Sheriff's Department

Page 4 of 6[illegible]

Los Angeles County Sheriff's Department

Page 5 of 6

Non-Employee Witnesses				
Last Name		First Name		M.I.
Street Address		Zip Code		Work Ph Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code		Work Ph Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code		Work Ph Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code		Work Ph Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code		Work Ph Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code		Work Ph Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code		Work Ph Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code		Work Ph Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code		Work Ph Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code		Work Ph Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code		Work Ph Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code		Work Ph Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code		Work Ph Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code		Work Ph Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code		Work Ph Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code		Work Ph Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code		Work Ph Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code		Work Ph Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code		Work Ph Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code		Work Ph Home Ph

Officer Involved Shooting Suspect Information

URN: 010-11288-0610-455

Page 6 of 6

Suspect Information

S 1	Last Name: Noriega		First Name: Ralph		M.I.
	AKA Last Name		First Name		M.I.
Sex: M Race: H		Street Address:		City:	State & Zip Code:
Work Phone:		Home Phone:	Social Security #:	Driver's License #:	
Age: 41 D.O.B. 09/15/69		Height: 509	Weight: 200	FBI #	CI #
Booking #		Primary Charge: 422PC		Secondary Charge:	
Coroner Case? <input type="checkbox"/>		Coroner Case #	Intoxication/Drug Usage? <input checked="" type="checkbox"/>	Substance Used: Amphetamine/Opiates	
Armed? <input type="checkbox"/>		Apprehended? <input checked="" type="checkbox"/>	Mental Illness? <input checked="" type="checkbox"/>	Criminal History? <input type="checkbox"/>	
Vehicle Make: Honda Warrior		Model: Motorcycle		Year: 2008	

S	Last Name		First Name		M.I.
	AKA Last Name		First Name		M.I.
Sex: Race:		Street Address:		City:	State & Zip Code:
Work Phone:		Home Phone:	Social Security #:	Driver's License #:	
Age: D.O.B.		Height:	Weight:	FBI #	CI #
Booking #		Primary Charge:		Secondary Charge:	
Coroner Case? <input type="checkbox"/>		Coroner Case #	Intoxication/Drug Usage? <input type="checkbox"/>	Substance Used:	
Armed? <input type="checkbox"/>		Apprehended? <input type="checkbox"/>	Mental Illness? <input type="checkbox"/>	Criminal History? <input type="checkbox"/>	
Vehicle Make		Model:		Year:	

S	Last Name		First Name		M.I.
	AKA Last Name		First Name		M.I.
Sex: Race:		Street Address:		City:	State & Zip Code:
Work Phone:		Home Phone:	Social Security #:	Driver's License #:	
Age: D.O.B.		Height:	Weight:	FBI #	CI #
Booking #		Primary Charge:		Secondary Charge:	
Coroner Case? <input type="checkbox"/>		Coroner Case #	Intoxication/Drug Usage? <input type="checkbox"/>	Substance Used:	
Armed? <input type="checkbox"/>		Apprehended? <input type="checkbox"/>	Mental Illness? <input type="checkbox"/>	Criminal History? <input type="checkbox"/>	
Vehicle Make		Model:		Year:	

S	Last Name		First Name		M.I.
	AKA Last Name		First Name		M.I.
Sex: Race:		Street Address:		City:	State & Zip Code:
Work Phone:		Home Phone:	Social Security #:	Driver's License #:	
Age: D.O.B.		Height:	Weight:	FBI #	CI #
Booking #		Primary Charge:		Secondary Charge:	
Coroner Case? <input type="checkbox"/>		Coroner Case #	Intoxication/Drug Usage? <input type="checkbox"/>	Substance Used:	
Armed? <input type="checkbox"/>		Apprehended? <input type="checkbox"/>	Mental Illness? <input type="checkbox"/>	Criminal History? <input type="checkbox"/>	
Vehicle Make		Model:		Year:	